

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Sabrina Cervantes for Assembly 2020			Date of This Filing 09/21/2020	Date Stamp Page 1 of 4	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER () -	I.D. NUMBER (if applicable) 1414122	Report No. 905763-KA			
STREET ADDRESS					
CITY Corona	STATE CA	ZIP CODE 92879			
<input type="checkbox"/> Amendment to Report No. _____ (explain below)			No. of Pages 4		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/18/2020	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:1218	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,547.44
09/18/2020	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:1219	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$502.92
09/18/2020	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:1220	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$45.23

*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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NAME OF FILER Sabrina Cervantes for Assembly 2020			Date of This Filing 09/21/2020	Date Stamp Page 2 of 4	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;"> CALIFORNIA FORM 497 </div> For Official Use Only
AREA CODE/PHONE NUMBER () -	I.D. NUMBER (if applicable) 1414122	Report No. 905763-KA			
STREET ADDRESS					
CITY Corona	STATE CA	ZIP CODE 92879			
			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
			No. of Pages 4		

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09/18/2020	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:1221	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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AREA CODE/PHONE NUMBER () -	I.D. NUMBER (if applicable) 1414122				
STREET ADDRESS					
CITY Corona	STATE CA	ZIP CODE 92879			

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

Memo Reference: NON:S497:1221
In-Kind Contribution

Memo Reference: NON:S497:1220
In-Kind Contribution

Memo Reference: NON:S497:1219
In-Kind Contribution

Memo Reference: NON:S497:1218
In-Kind Contribution
